

IN THE CLAIMS:

Please amend the claims as follows:

1-12. (Canceled)

13. (Currently amended) A method for stabilizing and facilitating recovery of injured bone within a living body, said method comprising:

providing a surgical instrument comprising a flexible cable and a plurality of permanent bone-contacting enlargements, the flexible cable having a first end, a second end, and a length sufficient to wrap around the injured bone, the bone-contacting enlargements being fixedly attached to the flexible cable between the first and second ends and being spaced apart from one another to provide linking cable portions alternating with the spaced bone-contacting enlargements;

passing the surgical instrument about the injured bone to contact the bone-contacting enlargements and the injured bone with one another, the bone-contacting enlargements positioning the linking cable portions in spaced relationship to the injured bone;

tensioning the flexible cable about a ~~constricted~~ region of the injured bone to constrict the region while the bone-contacting enlargements retain the linking cable portions in spaced relationship to the injured bone for permitting vascular communication across the constricted region of the injured bone; and

securing surgical instrument about the injured bone.

14. (Original) A method according to claim 13, wherein the flexible cable is formed of a metal.

15. (Original) A method according to claim 13, wherein the flexible cable is formed of a metal selected from stainless steel and cobalt chrome.

16. (Original) A method according to claim 13, wherein the flexible cable is axially inelastic.

17. (Original) A method according to claim 13, wherein the bone-contacting enlargements are obtuse.

18. (Original) A method according to claim 13, wherein the bone-contacting enlargements comprise beads.

19. (Original) A method according to claim 13, wherein the bone-contacting enlargements comprise a high molecular weight polymer.

20. (Original) A method according to claim 13, wherein the bone-contacting obtuse enlargements comprise polyethylene.

21. (Original) A method according to claim 13, wherein the bone-contacting enlargements comprise a metal.

22. (Original) A method according to claim 13, wherein the bone-contacting enlargements have peripheries circumferentially surrounding the flexible cable.

23. (Original) A method according to claim 13, wherein the bone-contacting enlargements each have a respective axial length smaller in dimension than respective axial lengths of adjacent ones of the linking cable portions.

24. (New) A method for stabilizing and facilitating recovery of injured bone within a living body, said method comprising:

providing a surgical instrument comprising a flexible cable and a plurality of permanent bone-contacting enlargements, the flexible cable having a first end portion, a second end portion free of bone-contacting enlargements, and a length sufficient to wrap around the injured bone, the bone-contacting enlargements being fixedly attached to the flexible cable between the first and second end portions and being spaced apart from one another to provide linking cable portions alternating with the spaced bone-contacting enlargements;

passing the surgical instrument about the injured bone to contact the bone-contacting enlargements and the injured bone with one another, the bone-contacting enlargements positioning the linking cable portions in spaced relationship to the injured bone;

engaging a tensioning device to the second end portion and tensioning the flexible cable about a region of the injured bone to constrict the region while the bone-contacting

enlargements retain the linking cable portions in spaced relationship to the injured bone for permitting vascular communication across the constricted region of the injured bone; and

securing surgical instrument about the injured bone.

25. (New) A method according to claim 24, wherein the flexible cable is formed of a metal.

26. (New) A method according to claim 24, wherein the flexible cable is axially inelastic.

27. (New) A method according to claim 24, wherein the bone-contacting enlargements are obtuse.

28. (New) A method according to claim 27, wherein the bone-contacting enlargements comprise beads.

29. (New) A method according to claim 24, wherein the bone-contacting enlargements have peripheries circumferentially surrounding the flexible cable.

30. (New) A method according to claim 24, wherein the bone-contacting enlargements each have a respective axial length smaller in dimension than respective axial lengths of adjacent ones of the linking cable portions.

31. (New) A method for stabilizing and facilitating recovery of injured bone within a living body, said method comprising:

providing a surgical instrument comprising a flexible cable and a plurality of permanent bone-contacting enlargements, the flexible cable having a first end, a second end, and a length sufficient to wrap around the injured bone, the bone-contacting enlargements being fixedly attached to the flexible cable between the first and second ends and being spaced apart from one another to provide linking cable portions alternating with the spaced bone-contacting enlargements;

passing the surgical instrument about the injured bone to contact the bone-contacting enlargements and the injured bone with one another, the bone-contacting enlargements positioning the linking cable portions in spaced relationship to the injured bone;

tensioning the flexible cable about a region of the injured bone to constrict the region while the bone-contacting enlargements retain the linking cable portions in spaced relationship to the injured bone for permitting vascular communication across the constricted region of the injured bone; and

providing a connecting device and securing surgical instrument about the injured bone via the connecting device.

32. (New) A method according to claim 31, further comprising:

crimping the first end of the flexible cable to a truncated cable portion of the connecting device, and feeding the second end of the flexible cable through a receiving region of the connecting device.

33. (New) A method according to claim 31, wherein the connecting device comprises a crimpable body portion for receiving and crimping with the first end of the flexible cable.

34. (New) A method according to claim 31, wherein the connecting device comprises a first screw for securing the first end of the flexible cable to the connecting device, and a second screw for securing the second end of the flexible cable to the connecting device.